STATE BOARD OF ELECTIONS STATE OF ILLINOIS



EMPLOYMENT APPLICATION

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The Office of the State Board of Elections is an Equal Opportunity Employer and does not discriminate on the basis of race, color, religion, sex, sexual orientation, national origin, ancestry, citizenship, age, marital status, arrest record, physical or mental disability, military status or unfavorable discharge from the military.

The State Board of Elections has its own personnel system and is not under the State of Illinois Personnel Code. Therefore, employment applications filed with other State agencies or employment systems are not applications for employment with this office.

DIRECTIONS

- Complete this application in full. Consideration will not be given to incomplete applications. You may submit and refer to an attached resume, where appropriate, in lieu of repeating information on this application.
- If you have questions about employment with the Office or need assistance in filling out this application form, please contact us at: 217/782-1596 (phone); 217/782-1518 TDD; 217/782-5959 (fax) or webmaster@elections.il.gov (email). You may also write us at the below address.
- Please submit your completed and signed application to:

Kelley Gray State Board of Elections 1020 S. Spring Street Springfield, IL 62704

- Additional information about the State Board of Elections can be found on our web sit at <u>www.elections.il.gov</u>.
- This Employment Application will be inactive after a period of one hundred and twenty (120) days.

SECTION I – APPLICANT INFORMATION

1. APPLICANT INFORMATION

Name:					
Street A	ddress:	City:	State:	Zip Code:	
Home Telephone: Work Telephone:				E-mail address:	
Position	Title Sought:		Work Location:		
2.	TYPE OF POSITION	I SOUGHT:			
	☐ Election S _I	pecialist	☐ Information Sy	/stems	
	☐ Clerical/Su	pport Staff	☐ Administrative	,	
	Other (describ	oe):			
3.	ARE YOU SEEKING AN \square ENTRY LEVEL OR \square EXPERIENCED POSITION?				
4.	SALARY DESIRED:	\$			
5.	ELIGIBILITY FOR EMPLOYMENT – If you are hired, can you supply the required documentation to verify your lawful right to work in the United States?				
	Clatos:	☐ Yes	☐ No		
6.	LOCALITY OF EMPLOYMENT – You would consider employment in:				
	☐ Springt	ield 🗌 Chic	ago Either Location		
7.	HAVE YOU EVER PLED GUILTY TO OR BEEN CONVICTED OF ANY CRIMINAL OFFENSE OTHER THAN A MINOR TRAFFIC VIOLATION? I yes, please explain:				
	, , , ,	☐ Yes	☐ No		
8.	HAVE YOU EVER B	EEN FIRED I	FROM A JOB? If yes, pl	ease explain:	
		☐ Yes	☐ No		
9.			I ELECTED OR APPOIN ATION? If yes, please e		
		☐ Yes	□ No		

SECTION II – WORK EXPERIENCE

Begin with your present position and work backwards. Include title changes, pertinent military experience, part-time positions and internships. Where appropriate you may refer to an attached resume if it provides the requested information.

City:	State:	Zip Code:
	Employment Dates: (Month/Year -	Month/Year)
	Monthly Salary: Starting – Ending	
City:	State:	Zip Code:
	Employment Dates: (Month/Year -	Month/Year)
	Monthly Salary: Starting – Ending	
		Employment Dates: (Month/Year – Monthly Salary: Starting – Ending

(Attach additional sheets as necessary to provide a complete work history.)

SECTION III - ELECTION EXPERIENCE

11. PLEASE DESCRIBE ALL ELECTION EXPERIENCE. INCLUDE NUMBER OF YEARS EXPERIENCE, IN WHAT CAPACITY YOU WERE INVOLVED AND ANY EDUCATION YOU FEEL IS PERTINENT. (Include additional sheets as necessary.)

If you are applying for a support staff position, skip questions 11, 12, 13 and 14.

SECTION IV – OFFICE SKILLS

12. LIST COMPUTER LANGUAGES, PROGRAMS, SOFTWARE, AND APPLICATIONS IN WHICH YOU HAVE TRAINING OR EXPERIENCE:

13. LIST ANY OTHER SKILLS OR TRAINING USEFUL TO FULFILLING THE REQUIREMENTS OF THE POSITION FOR WHICH YOU ARE APPLYING:

Section V – FORMAL EDUCATION

14.	HIGH SCHOOL Name, City, State Did you earn a diploma or GED? Yes	□No
4.5	EDUCATION DEVOND LUCU COLICO	E I II

15.	EDUCATION BEYOND HIGH SCHOOL.	For each college or university
	attended provide:	

NAME/LOCATION OF EDUCATIONAL INSTITUTION	TOTAL HOURS EARNED	MAJOR	MINOR	DA ^T ATTE FROM	TES NDED TO	GPA/S CALE	TYPE OF DEGREE AND DATE
UNDERGRADUATE:				/	/		
				/	/		
				/	/		
GRADUATE:				/	/		

(Attach additional sheets of necessary to provide a complete educational history.)

SECTION VI – GENERAL BACKGROUND

16. MAY WE C	ONTACT YOUR	R CURRENT EM	PLOYER(S)?	
		Yes 🗌 No		
If yes, please prov	ride the following	g information:		
Name:				
Street Address:		City:	State:	Zip Code:
Telephone:			E-mail Address:	
Title/Occupation:				
agreed to d	comment on, yo	•	e knowledgeable o skills. You are end s.	
NAME/ADDRESS	TELEPHONE NUMBER	RELATIONSHIP	TITLE OR OCCUPATION AND EMPLOYER	YEARS KNOWN
	CURRENTLY IN UCATIONAL LO		THE REPAYMENT	OF ANY
		Yes 🗌 No		
of any educ \$600.00 or	cational loan for more, shall, as	a period of 6 mode a condition of em	s in default on the r nths or and in the a aployment, make a r or guarantor of the	mount of satisfactory

19. NARRATIVE STATEMENT: Tell us how your education and experience can be useful for this position or for this office. We are interested in knowing how effectively you can express your ideas as well as in the substance of your response.

20.					
	The State Board of Elections is an Equal Opportunity Employer. We invite you to complete the following. Completion of the information is voluntary and failure to provide it will not subject you to any adverse treatment. Check ONE letter.				
	FEMALE ☐A	MALE □G	White not of Hispanic Origin. A person having origins in any of the original peoples of Europe, North Africa or the Middle East.		
	□В	□н	African American not of Hispanic Origin. A person having origins in any of the black racial groups of Africa.		
	□С	□J	Native American. A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community.		
	□D	□K	Asian. A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.		
	□E	□L	Hispanic. A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.		

SECTION VII – AUTHORIZATION

In consideration of my application for employment, I authorize the State Board of Elections (SBE): to make investigations concerning my fitness for employment with the SBE; to seek information about me from the references and employers contained in this application or any documents submitted by me; to investigate my employment history; and to make investigations concerning any oral or written information obtained about me during the course of the consideration process.

I authorize the references, educational institutions and employers listed on this application to give the SBE any and all information concerning my education and employment and pertinent information they may have, personal or otherwise, including the names of additional references which the SBE may contact. I release all parties from any and all liability for any damage that may result from furnishing information concerning me to the SBE. A photocopy of this authorization shall be as valid as the original.

I understand that this authorization includes: any communications with me, my references, former employers, educational institutions, or additional references furnished by my references or former employers; and investigations concerning information contained in cover letters, resumes, writing samples, letters of recommendation, placement office files, student records and any other documents received. I agree that all materials received by SBE become the property of the SBE.

I certify that the information contained in this application is true and complete to the best of my knowledge and understand that omission or misrepresentation of facts is grounds for denial of employment or dismissal if hired. I understand that my employment will be governed by the requirements of the position, the Personnel Rules of the SBE, and Office policies. If hired, I agree to comply with all rules, regulations, and employment policies of the SBE. I understand that, according to those rules, the first six months of employment are probationary and may be terminated at any time. The Personnel Rules are available upon request and may be changed at any time. If contacted for an interview, I understand that I may be required to bring to the interview a photocopy of the transcript from my most recent educational program. I also agree that if asked I will authorize the release of transcripts or records of educational institutions directly to the SBE at my own expense.

Written Signature	Date of Application

SBE001 - 1/05